

Approved For Release 2000/04/11 : CIA-RDP64-00360R000400070021-8

U. S. Cost Reimbursable
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No. 628

To _____
(Payee)

PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Discount Terms Fixed Fee				\$2,970.00	
Use continuation sheet(s) if necessary						Total	2,970.00

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from _____ to _____ Weight _____ Government B/L No. _____
(Payee must NOT use this space)

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

Date 25X1A _____
Per 25X1A _____
Contract No. A101 Date _____ Req. No. _____
Amount verified, correct for _____
(Signature or initials) 25X1A
Invoice Rec'd. 1/4/56

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

Approved for \$ 2,970.00

By 25X1A 29/5 **SIGN ORIGINAL ONLY**
Title Contracting Officer

Title Authorized Certifying Officer

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

APPROVED:

25X1A
Approving Officer

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States
Cash, \$ _____, on _____, 19____, Payee _____ } favor of payee named above.
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company, as in the case of a check, must appear. For example: "John Doe Company, per John Smith, Secretary."
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

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Public Voucher for Purchase of
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Services Other Than Personal

CONTINUATION SHEET

U. S. Cost Reimbursable Sheet No. 1 of Bureau Voucher No. 137
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Fixed Fee properly chargeable to Contract A101, System IV, for the period 1/16/55 thru 10/31/55 inclusive Fixed Fee <i>System IV</i>				\$2,970.	00

THE RAMO WOULD BRIDGE CORPORATION

LOS ANGELES 45, CALIFORNIA

INTEROFFICE CORRESPONDENCE

STATINTL

TO:

[REDACTED]

CC: Accounting
Files

DATE: 29 November 1955

SUBJECT MJO 5024

FROM:

STATINTL

[REDACTED]

It is estimated that as of October 31, 1955,
Project 5024 was about 80% completed.

STATINTL

[REDACTED]

SAPC 34719

COPY 1 OF 3

THE RAMO-WOOLDRIDGE CORPORATION
8820 Bellanca Avenue
Los Angeles 45, California

SUBJECT APPROVAL OF FIXED FEE - Contract A101, System 4

ATTENTION:

IN ACCORDANCE WITH Clause 4 (c) of the Contract

herewith his claim for fixed fee due under the subject contract for the period 1/16/55 through 10/31/55 in the amount of \$ 2,970.00

TOTAL AUTHORIZED FEE PER CONTRACT \$4,125.00

ELAPSED TIME METHOD	OF COMPLETION METHOD	ON EXPENDITURES
Elapsed Time - Mo. <u>9½</u>	Project Engineer % of Completion <u>80%</u>	Amount of Contract Excluding Fee \$ <u>50,000.00</u>
Amt. due each Mo. \$ <u>305.55</u>	Total Fee Earned <u>3,300.00</u>	Total Expended To Date <u>31,918.19</u>
Total due to date \$ <u>2,902.73</u>	Less 10% H.B. <u>330.00</u>	Percent of Completion Based on Expenditures
Fee claimed to date <u>- 0 -</u>	Less payments <u>- 0 -</u>	Percent of Completion Claim based on Expenditures
Less 10% H.B. <u>- 0 -</u>	Percent of Completion Claim <u>2,970.00</u>	\$ <u>63.8%</u>
Less payments <u>- 0 -</u>		Less 10% H.B.
Elapsed Time Claim <u>2,902.73</u>		

STATINTL

Project Engineer Signature

Amount of fee claimed by Contractor for period

1/16/55 through 10/31/55 \$ 2,970.00

I certify that the fixed fee claimed is correct and just, and that it is proportionate to the progress made on the contract.

STATINTL

Director Administration and Finance

STATINTL

Approved: